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TO: Commissioner of Patents
FAX NO.: 703-872-9306
FROM: Kin-Wah Tong
DATE: September 3, 2004
MATTER: Serial No. 09/778,254 Filed: 02/07/01
DOCKET NO.: ATT/2000-0192
APPLICANT: Leonard Joseph Cimini, Jr.

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| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 09/778,254 | |
| | Filing Date | 02/07/01 | |
| | First Named Inventor | Leonard Joseph Cimlini, Jr. | |
| | Art Unit | 2862 | |
| | Examiner Name | Nguyen, Alan V. | |
| Total Number of Pages in This Submission | 10 | Attorney Docket Number | ATT 2000-0192 |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply - <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;">Facsimile Transmission</p> |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
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| Firm or Individual name | Kin-Wah Tong, Reg. No. 39,400 |
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